

For all events promoted under the umbrella of Old Fairhaven Association's non-profit status. Note: Events must be self-supporting. The OFA is not liable for any debts incurred by the event unless previously approved by the Board.

Name of Event	
	Place
Describe Event & Its Purpose	
Set up time Event	
Name of Organization	
Name of Organizer(s)	
Address	
PhonesHome	Cell
Email	
Is your organization non-profit?	
Will the event benefit a charity?	
Is this event covered under your Insur	rance?Company
Is event on City or Private Property?_	
	s required?
	ty and advertising?
Describe	
Why should this event be under Fairb	naven Association non-profit umbrella? How will your event
benefit Fairhaven?	ė ·
Will funds go through the Old Fairba	ven Association Account?
	From these funds?
	s where do they go?
	where do they go.
1 .	afterward?
	med ward:
Data of Board Drocontation	Name of Presenter
Date of Board Presentation	Name of Presenter
\$ Advance Deposit Required?	Vote Results
Appro	val Signature
-11	President